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DODTON, MA	02199-7010			1				(Depositor's name)
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APPLICATION NO. FILING DATE				FIRST NAMED INVENT	OR	ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/511,385 10/15/2004				82099-0102 2108				
TITLE OF INVENTION				,				
APPLN. TYPE	SMALL ENTITY	IS	SUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUI	DATE DUE
nonprovisional	YES	YES		\$300	\$0		\$1020	02/01/2008
EXAMINER			ART UNIT CLASS-SUBCLA		]			
GHERBI, SUZI	ETTE JAIME J	3738	623-023650					
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3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO B	E PRINTED ON	THE PATENT (print or	type) -			
		ified be	low, no assignee of this form is NO					locument has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Gastrix Medical, LLC Marblehead, MA								
Picase check the appropri	iate assignee category or	catego	ries (will not be pr	rinted on the patent):	Individual 🖺 Co	orporati	on or other private gr	oup entity 🔲 Government
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5. Change in Entity Stat	tus (from status indicator s SMALL ENTITY statt			☐ b. Applicant is no l				
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This collection of informal an application. Confident submitting the completed this form and/or suggestions.	ation is required by 37 C iality is governed by 35 application form to the ons for reducing this bur	FR 1.3 U.S.C. USPT den, sh	11. The information 122 and 37 CFR O. Time will vary tould be sent to the	on is required to obtain on its required to obtain on 1.14. This collection is depending upon the ince Chief Information Off	r retain a benefit by t estimated to take 12 r lividual case. Any co cer, U.S. Patent and	he publ ninutes mincute Tradem	ic which is to file (an to complete, including s on the amount of the lark Office, U.S. Dep	d by the USPTO to process) ng gathering, preparing, and me you require to complete artment of Commerce, P.O.

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